

# Late Independent Expenditure Report

Type or print in ink.  
Amounts may be rounded to whole dollars.

LATE INDEPENDENT EXPENDITURE REPORT

<b>NAME OF FILER</b> Alliance for a Better California, educators, firefighters, school employees, health care givers and labor organizations			<b>Date of This Filing</b> 11/01/2005  <b>Report No.</b> LIE-1062  <input type="checkbox"/> <b>Amendment to Report No.</b> _____ (explain below)  <b>No. of Pages</b> 6	Date Stamp   Page 1 of 6	<b>CALIFORNIA FORM 496</b> For Official Use Only
<b>AREA CODE/PHONE NUMBER</b> (916)443-7817		<b>I.D. NUMBER (if applicable)</b> 1273998			
<b>STREET ADDRESS</b>					
<b>CITY</b> Sacramento	<b>STATE</b> CA	<b>ZIP CODE</b> 95814			

## 1. List Only One Candidate or Ballot Measure

<b>NAME OF CANDIDATE SUPPORTED OR OPPOSED</b>			<b>NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED</b> Proposition 77. Reapportionment. Initiative Constitutional Amendment			
<b>OFFICE SOUGHT OR HELD/DISTRICT NO.</b>	<b>SUPPORT</b>	<b>OPPOSE</b>	<b>BALLOT NO./LETTER</b> 77	<b>JURISDICTION</b> Statewide	<b>SUPPORT</b>	<b>OPPOSE</b> X

## 2. Independent Expenditures Made

Attach additional information on appropriately labeled continuation sheets.

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
10/22/2005	Translation Services	\$9.92
10/22/2005	Office Expenses	\$3.03
10/22/2005	Food for Volunteers	\$2.64
10/22/2005	Staff Expenss	\$4.59
10/22/2005	Office Expenses	\$7.39

Reason for Amendment:

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DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
10/22/2005	Food for Volunteers	\$20.08
10/22/2005	Food for Volunteers	\$5.25
10/22/2005	Food for Volunteers	\$6.71
10/22/2005	Staff Expenses	\$23.87
10/22/2005	Office Expenses	\$4.48

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DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
10/22/2005	Office Expenses	\$9.20
10/22/2005	Staff Expenses	\$4.79
10/22/2005	Office Expenses	\$13.11
10/22/2005	Office Expenses	\$16.54
10/22/2005	Office Expenses	\$128.18

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## 2. Independent Expenditures Made

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DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
10/22/2005	Office Expenses	\$9.35
10/22/2005	Office Expenses	\$13.01
10/22/2005	Office Expenses	\$8.62
10/22/2005	Office Expenses	\$5.26
10/22/2005	Office Expenses	\$2.66

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DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
10/22/2005	Staff Expenses	\$3.06
10/22/2005	Office Expenses	\$16.45
10/22/2005	Office Expenses	\$35.86

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**CALIFORNIA**  
**FORM 496**

NAME OF FILER

I.D. NUMBER (If applicable)

## 3. Contributions of \$100 or More Received\*

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE**	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED	INTEREST RATES
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____%
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____%
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____%
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____%
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____%
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____%

\*Major donor and independent expenditure committees that do not receive contributions are not required to complete Part 3.

\*\*Contributor Codes  
 IND - Individual  
 COM - Recipient Committee (other than PTY or SCC)  
 OTH - Other  
 PTY - Political Party  
 SCC - Small Contributor Committee

FPPC Form 496 (June/01)  
 FPPC Toll-Free Helpline: 866/ASK-FPPC  
 866/275-3772